

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N11000007847

**Entity Name:** PLEASANT GROVE MISSIONARY BAPTIST CHURCH OF JAX, INC.

**FILED**  
**Jan 09, 2015**  
**Secretary of State**  
**CC1136691918**

**Current Principal Place of Business:**

1401 EVERGREEN AVE.  
JACKSONVILLE, FL 32206

**Current Mailing Address:**

1401 EVERGREEN AVE.  
JACKSONVILLE, FL 32206 US

**FEI Number:** 45-3126869

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

LOVE, LEROY  
6711 ROYAL LEAF LANE  
JACKSONVILLE, FL 32244 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	P	Title	V
Name	LOVE, LEROY	Name	CLOWERS, MALACHI
Address	6711 ROYAL LEAF LANE	Address	3545 ST JOHNS BLUFF RD S. #145
City-State-Zip:	JACKSONVILLE FL 32244	City-State-Zip:	JACKSONVILLE FL 32224
Title	S	Title	T
Name	LOVE, CHARLENE M	Name	BRANTON, WILLIS SR.
Address	6711 ROYAL LEAF LANE	Address	1615 FRIAR RD
City-State-Zip:	JACKSONVILLE FL 32244	City-State-Zip:	JACKSONVILLE FL 32211
Title	C		
Name	WALKER, ALVIN		
Address	2840 STUART STREET		
City-State-Zip:	JACKSONVILLE FL 32209		

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** LEROY LOVE

**PRESIDENT**

**01/09/2015**

Electronic Signature of Signing Officer/Director Detail

Date